## DT12 Rec'd PCT/PTO 1 7 MAR 2005

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: GIOVANNI

Middle Name::

Family Name:: DE TONI

Name Suffix::

City of Residence:: SESTO SAN GIOVANNI

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIALE G. MATTEOTTI, 191

Address::

City of Mailing Address:: SESTO SAN GIOVANNI

State or Province of Mailing Address::
Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20099

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: RENZO

Middle Name::

Family Name:: LISEI

Name Suffix::

City of Residence:: PADERNO DUGNANO

State or Province of

Residence::

Country of Residence::

Street of Mailing VIA BOLIVIA, 36

Address::

City of Mailing Address:: PADERNO DUGNANO

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address:: I-20037

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: MAURIZIO

Middle Name::

Family Name:: RIPAMONTI

Name Suffix::

City of Residence:: SERGATE

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIA FRATELLI CERVI Address:: RES. TREFILI S.N.C.

City of Mailing Address:: SERGATE

State or Province of Mailing Address::
Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20090

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: ROBERTO

Middle Name::

Family Name:: SALGARI

Name Suffix::

City of Residence:: BASIGLIO

State or Province of

Residence::

Country of Residence:: ITALY
Street of Mailing VIA COLOMBO

Address::		TIGLI, 212		
City of Mailing A	BASIGLIO	BASIGLIO		
State or Province	of Mailing Add	lress::		
Country of Mailin	g Address::	ITALY		
Postal or Zip Code	e of Mailing Ad	dress:: I-20080		
	_		-	
Correspondence In	formation			
Correspondence Customer		00466		
Number::				
Representative In	formation			
Representative Customer		00466		
Number::				
Domestic Priority	Information			
Application::	Continuity	Parent		Parent Filing
-	Type::	Application::		Date::
This application N	National Stage	of PCT/IT2002/000	594	9/17/02
			<u>-</u> L	
Foreign Priority 1	Information			
Country:: A	application	Filing Date::	Priority	
N	<pre>Jumber::</pre>		Claimed::	
			<del>                                     </del>	

## Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::